POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*MX*	70591	2/1
O.I.P.E. CLASSIFIER		49	2/15/00
FORMALITY REVIEW		71622	2-22-00
RESPONSE FORMALITY REVIEW		71622	3-30-00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim / Date columns (dates: 1/15/03, 2/2/03, 3/23/04)

Final	Original	1/15/03	2/2/03	3/23/04
1	✔	✔	✔	
	2	✔	✔	✔
3	✔	✔	✔	
4	✔	✔	✔	
5	✔	✔	✔	
6		✔	✔	
7		✔	✔	
8		✔	✔	
9		✔	✔	
10		✔	✔	
11		✔	✔	
12		✔	✔	
13		✔	✔	
14		✔	✔	
15				
... (claims 16–50 blank)				

Second column: claims 51–100 (blank)

Third column: claims 101–150 (blank)

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)